

PTO/SB/01 (08-03)

Approved for use through 07/31/2006. OMB 0651-0032

U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE

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**DECLARATION FOR UTILITY OR
DESIGN
PATENT APPLICATION
(37 CFR 1.63)**Declaration
Submitted
With Initial
Filing

OR

Declaration
Submitted after Initial
Filing (surcharge
(37 CFR 1.16 (e))
required)

Attorney Docket Number

BIOSTAR.04.01

First Named Inventor

Pranger

COMPLETE IF KNOWN

Application Number

10/787,522

Filing Date

2/26/2004

Art Unit

3761

Examiner Name

I hereby declare that:

Each inventor's residence, mailing address, and citizenship are as stated below next to their name.

I believe the inventor(s) named below to be the original and first inventor(s) of the subject matter which is claimed and for which a patent is sought on the invention entitled:

Self-contained micromechanical ventilator

(Title of the Invention)

the specification of which



is attached hereto

OR



was filed on (MM/DD/YYYY)

02/26/2004

as United States Application Number or PCT International

Application Number

10/787,522

and was amended on (MM/DD/YYYY)

(if applicable).

I hereby state that I have reviewed and understand the contents of the above identified specification, including the claims, as amended by any amendment specifically referred to above.

I acknowledge the duty to disclose information which is material to patentability as defined in 37 CFR 1.56, including for continuation-in-part applications, material information which became available between the filing date of the prior application and the national or PCT international filing date of the continuation-in-part application.

I hereby claim foreign priority benefits under 35 U.S.C. 119(a)-(d) or (f), or 365(b) of any foreign application(s) for patent, inventor's or plant breeder's rights certificate(s), or 365(a) of any PCT international application which designated at least one country other than the United States of America, listed below and have also identified below, by checking the box, any foreign application for patent, inventor's or plant breeder's rights certificate(s), or any PCT international application having a filing date before that of the application on which priority is claimed.

| Prior Foreign Application Number(s) | Country | Foreign Filing Date (MM/DD/YYYY) | Priority Not Claimed | Certified Copy Attached? | |
|--|---------|-------------------------------------|--------------------------|--------------------------|--------------------------|
| | | | | Yes | No |
| | | | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| | | | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| | | | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| | | | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |

☐ Additional foreign application numbers are listed on a supplemental priority data sheet PTO/SB/02B attached hereto.

[Page 1 of 2]

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DECLARATION — Utility or Design Patent Application

Direct all correspondence to: ☐ Customer Number: OR ☒ Correspondence address below

Name

Ms. Abanti Bhattacharyya Singla, Esq.

Address

Bartunek & Bhattacharyya, Ltd.
10420 Little Patuxent Parkway, Suite 405

City

Columbia

State

MD

ZIP

21044

Country

USA

Telephone

(410) 964-9553

Fax

(410) 964-2660

I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under 18 U.S.C. 1001 and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.

NAME OF SOLE OR FIRST INVENTOR:

☐ A petition has been filed for this unsigned inventor

Given Name (first and middle [if any])

L. Alex

Family Name or Surname

Pranger

Inventor's
Signature

Date

7/1/04

Residence: City

Gaithersburg

State

MD

Country

USA

Citizenship

USA

Mailing Address

18609 Phoebe Way

City

Gaithersburg

State

MD

ZIP

20879

Country

USA

NAME OF SECOND INVENTOR:

☐ A petition has been filed for this unsigned inventor

Given Name (first and middle [if any])

William P.

Family Name or Surname

Wiesmann

Inventor's
Signature

Date

7/1/04

Residence: City

Washington

State

DC

Country

USA

Citizenship

USA

Mailing Address

1231 28th Street NW

City

Washington

State

DC

ZIP

20007

Country

USA



Additional inventors or a legal representative are being named on the 1 supplemental sheet(s) PTO/SB/02A or 02LR attached hereto.

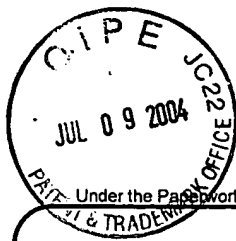
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DECLARATION**ADDITIONAL INVENTOR(S)**
Supplemental SheetPage 1 of 1

| | | | |
|---|-------------|---|--------------------|
| Name of Additional Joint Inventor, if any: | | <input type="checkbox"/> A petition has been filed for this unsigned inventor | |
| Given Name (first and middle (if any)) | | Family Name or Surname | |
| Adrian R. | | Urias | |
| Inventor's Signature <i>Adrian R. Urias</i> | | Date <i>July 1, 2004</i> | |
| Gaithersburg Residence: City | MD State | USA Country | USA Citizenship |
| 1022 Southern Night Lane Mailing Address | | | |
| Mailing Address | | | |
| Gaithersburg City | MD State | 20879 Zip | USA Country |
| Name of Additional Joint Inventor, if any: | | <input type="checkbox"/> A petition has been filed for this unsigned inventor | |
| Given Name (first and middle (if any)) | | Family Name or Surname | |
| | | | |
| Inventor's Signature | | Date | |
| Residence: City | State | Country | Citizenship |
| Mailing Address | | | |
| Mailing Address | | | |
| City | State | Zip | Country |
| Name of Additional Joint Inventor, if any: | | <input type="checkbox"/> A petition has been filed for this unsigned inventor | |
| Given Name (first and middle (if any)) | | Family Name or Surname | |
| | | | |
| Inventor's Signature | | Date | |
| Residence: City | State | Country | Citizenship |
| Mailing Address | | | |
| Mailing Address | | | |
| City | State | Zip | Country |

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**POWER OF ATTORNEY
and
CORRESPONDENCE ADDRESS
INDICATION FORM**

| | |
|------------------------|--------------------------------|
| Application Number | 10/787,522 |
| Filing Date | 2/26/2004 |
| First Named Inventor | Pranger |
| Title | Self-contained micromechanical |
| Art Unit | 3761 |
| Examiner Name | |
| Attorney Docket Number | BIOSTAR.04.01 |

I hereby appoint:

☐ Practitioners associated with the Customer Number:

OR

☒ Practitioner(s) named below:

| Name | Registration Number |
|---------------------------------------|---------------------|
| Ms. Abanti Bhattacharyya Singla, Esq. | 36,681 |
| | |
| | |
| | |

as my/our attorney(s) or agent(s) to prosecute the application identified above, and to transact all business in the United States Patent and Trademark Office connected therewith.

Please recognize or change the correspondence address for the above-identified application to:

☐ The address associated with the above-mentioned Customer Number:

OR

☐ The address associated with Customer Number:

| | | | | | |
|---|--|-------|----------------|-----|-------|
| <input checked="" type="checkbox"/> Firm or Individual Name | Ms. Abanti Bhattacharyya Singla, Esq. | | | | |
| Address | Bartunek & Bhattacharyya, Ltd. | | | | |
| Address | 10420 Little Patuxent Parkway, Suite 405 | | | | |
| City | Columbia | State | MD | Zip | 21044 |
| Country | USA | | | | |
| Telephone | (410) 964-9553 | Fax | (410) 964-2660 | | |

I am the:

☒ Applicant/Inventor.

☐ Assignee of record of the entire interest. See 37 CFR 3.71.
Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96)

SIGNATURE of Applicant or Assignee of Record

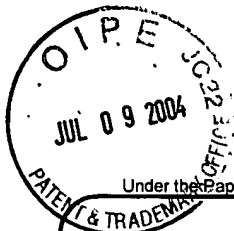
| | | | | | |
|-----------|------------------|--|--|-----------|----------------|
| Name | L. Alex. Pranger | | | | |
| Signature | | | | | |
| Date | July 9, 2004 | | | Telephone | (301) 428-9818 |

NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below*.

☒ *Total of 3 forms are submitted.

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PTO/SB/81 (09-03)

Approved for use through 11/30/2005. OMB 0651-0035

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| | |
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| Application Number | 10/787,522 |
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| First Named Inventor | Pranger |
| Title | Self-contained micromechanical |
| Art Unit | 3761 |
| Examiner Name | |
| Attorney Docket Number | BIOSTAR.04.01 |

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OR

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| Ms. Abanti Bhattacharyya Singla, Esq. | 36,681 |
| | |
| | |
| | |

as my/our attorney(s) or agent(s) to prosecute the application identified above, and to transact all business in the United States Patent and Trademark Office connected therewith.

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☐ The address associated with the above-mentioned Customer Number:

OR

☐ The address associated with Customer Number:

OR

| | | | | |
|---|--|-------|----------------|-----------|
| <input checked="" type="checkbox"/> Firm or Individual Name | Ms. Abanti Bhattacharyya Singla, Esq. | | | |
| Address | Bartunek & Bhattacharyya, Ltd. | | | |
| Address | 10420 Little Patuxent Parkway, Suite 405 | | | |
| City | Columbia | State | MD | Zip 21044 |
| Country | USA | | | |
| Telephone | (410) 964-9553 | Fax | (410) 964-2660 | |

I am the:

☒ Applicant/Inventor.☐ Assignee of record of the entire interest. See 37 CFR 3.71.
Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96)**SIGNATURE of Applicant or Assignee of Record**

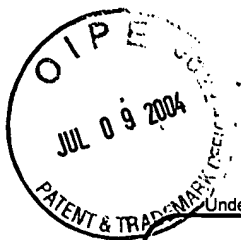
| | | | |
|-----------|---------------------|-----------|----------------|
| Name | William P. Wiesmann | | |
| Signature | | | |
| Date | 7/1/04 | Telephone | (301) 428-9818 |

NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below*.

☒ *Total of 3 forms are submitted.

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| | | | | | |
|---|--|-------|----------------|-----|-------|
| <input checked="" type="checkbox"/> Firm or Individual Name | Ms. Abanti Bhattacharyya Singla, Esq. | | | | |
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| Country | USA | | | | |
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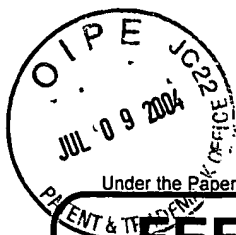
| | | | |
|-----------|-----------------|-----------|----------------|
| Name | Adrian R. Urias | | |
| Signature | | | |
| Date | July 1, 2004 | Telephone | (301) 428-9818 |

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FEE TRANSMITTAL for FY 2004

Effective 10/01/2003. Patent fees are subject to annual revision.

☒ Applicant claims small entity status. See 37 CFR 1.27

TOTAL AMOUNT OF PAYMENT (\$ 65.00

Complete if Known

| | |
|----------------------|---------------|
| Application Number | 10/787,522 |
| Filing Date | 2/26/2004 |
| First Named Inventor | Pranger |
| Examiner Name | |
| Art Unit | 3761 |
| Attorney Docket No. | BIOSTAR.04.01 |

METHOD OF PAYMENT (check all that apply)

☒ Check ☐ Credit card ☐ Money Order ☐ Other ☐ None

☐ Deposit Account:

Deposit Account Number
Deposit Account Name

The Director is authorized to: (check all that apply)

☐ Charge fee(s) indicated below ☐ Credit any overpayments

☐ Charge any additional fee(s) or any underpayment of fee(s)

☐ Charge fee(s) indicated below, except for the filing fee to the above-identified deposit account.

FEE CALCULATION

1. BASIC FILING FEE

| Large Entity | | Small Entity | | Fee Description | Fee Paid |
|--------------|----------|--------------|----------|------------------------|----------|
| Fee Code | Fee (\$) | Fee Code | Fee (\$) | | |
| 1001 | 770 | 2001 | 385 | Utility filing fee | |
| 1002 | 340 | 2002 | 170 | Design filing fee | |
| 1003 | 530 | 2003 | 265 | Plant filing fee | |
| 1004 | 770 | 2004 | 385 | Reissue filing fee | |
| 1005 | 160 | 2005 | 80 | Provisional filing fee | |
| SUBTOTAL (1) | | | | | (\$ 0.00 |

2. EXTRA CLAIM FEES FOR UTILITY AND REISSUE

| | | | | | | | |
|--------------------|--|--------------|--|----------------|--|----------|--|
| Total Claims | | Extra Claims | | Fee from below | | Fee Paid | |
| Independent Claims | | -20** = | | X | | | |
| Multiple Dependent | | -3** = | | X | | | |

| Large Entity | | Small Entity | | Fee Description | Fee Paid |
|--------------|----------|--------------|----------|--|----------|
| Fee Code | Fee (\$) | Fee Code | Fee (\$) | | |
| 1202 | 18 | 2202 | 9 | Claims in excess of 20 | |
| 1201 | 86 | 2201 | 43 | Independent claims in excess of 3 | |
| 1203 | 290 | 2203 | 145 | Multiple dependent claim, if not paid | |
| 1204 | 86 | 2204 | 43 | ** Reissue independent claims over original patent | |
| 1205 | 18 | 2205 | 9 | ** Reissue claims in excess of 20 and over original patent | |
| SUBTOTAL (2) | | | | | (\$ 0.00 |

**or number previously paid, if greater; For Reissues, see above

FEE CALCULATION (continued)

3. ADDITIONAL FEES

| Large Entity | | Small Entity | | Fee Description | Fee Paid |
|--------------|----------|--------------|----------|--|----------|
| Fee Code | Fee (\$) | Fee Code | Fee (\$) | | |
| 1051 | 130 | 2051 | 65 | Surcharge - late filing fee or oath | 65.00 |
| 1052 | 50 | 2052 | 25 | Surcharge - late provisional filing fee or cover sheet | |
| 1053 | 130 | 1053 | 130 | Non-English specification | |
| 1812 | 2,520 | 1812 | 2,520 | For filing a request for <i>ex parte</i> reexamination | |
| 1804 | 920* | 1804 | 920* | Requesting publication of SIR prior to Examiner action | |
| 1805 | 1,840* | 1805 | 1,840* | Requesting publication of SIR after Examiner action | |
| 1251 | 110 | 2251 | 55 | Extension for reply within first month | |
| 1252 | 420 | 2252 | 210 | Extension for reply within second month | |
| 1253 | 950 | 2253 | 475 | Extension for reply within third month | |
| 1254 | 1,480 | 2254 | 740 | Extension for reply within fourth month | |
| 1255 | 2,010 | 2255 | 1,005 | Extension for reply within fifth month | |
| 1401 | 330 | 2401 | 165 | Notice of Appeal | |
| 1402 | 330 | 2402 | 165 | Filing a brief in support of an appeal | |
| 1403 | 290 | 2403 | 145 | Request for oral hearing | |
| 1451 | 1,510 | 1451 | 1,510 | Petition to institute a public use proceeding | |
| 1452 | 110 | 2452 | 55 | Petition to revive - unavoidable | |
| 1453 | 1,330 | 2453 | 665 | Petition to revive - unintentional | |
| 1501 | 1,330 | 2501 | 665 | Utility issue fee (or reissue) | |
| 1502 | 480 | 2502 | 240 | Design issue fee | |
| 1503 | 640 | 2503 | 320 | Plant issue fee | |
| 1460 | 130 | 1460 | 130 | Petitions to the Commissioner | |
| 1807 | 50 | 1807 | 50 | Processing fee under 37 CFR 1.17(q) | |
| 1806 | 180 | 1806 | 180 | Submission of Information Disclosure Stmt | |
| 8021 | 40 | 8021 | 40 | Recording each patent assignment per property (times number of properties) | |
| 1809 | 770 | 2809 | 385 | Filing a submission after final rejection (37 CFR 1.129(a)) | |
| 1810 | 770 | 2810 | 385 | For each additional invention to be examined (37 CFR 1.129(b)) | |
| 1801 | 770 | 2801 | 385 | Request for Continued Examination (RCE) | |
| 1802 | 900 | 1802 | 900 | Request for expedited examination of a design application | |

Other fee (specify)

*Reduced by Basic Filing Fee Paid

SUBTOTAL (3) (\$ 65.00

SUBMITTED BY

| | | | | | |
|-------------------|-----------------------------------|-----------------------------------|--------|-----------|--------------|
| Name (Print/Type) | Abanti Bhattacharyya Singla, Esq. | Registration No. (Attorney/Agent) | 36,681 | Telephone | 410-964-9553 |
| Signature | | Date | 7-9-04 | | |

WARNING: Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2038.

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